

# Egg/Nest Destruction Data Sheet

Property Name \_\_\_\_\_ Year \_\_\_\_\_

Nest # \_\_\_\_\_ Neck bands numbers (if any) \_\_\_\_\_

Date of visit	# of eggs in nest	# of eggs treated	# of new eggs in nest	Embryo stage	Comments

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Make as many copies as you need of this form to record all your nests.